PTC/SB/29 (8/98)
Approved for use through 09/30/2000. OMB 0651-0032

FEB 2 3 15	199 3	ED PROSECUTION REQUEST TRANS Submit en original, and a duplicate for Continuation or Divisional application	SMITTAL for fee processing.	CHECK BOX, # applicable: DUPLICATE
G TRADE			Attorney Docket No. of Prior Application	KAMMON 3.0-025
Address to		Assistant Commissioner for Patents	First Named Inventor	SASAKI, et al.
	Box CPA	mimissioner for Patents	Examiner Name	Bruce A. Lev
	Washington,	gton, DC 20231	Group / Art Unit	3634
			Express Mail Label Fro	M264237257US
This is a n	equest for a	continuation or divi		er 37 C.F.R. § 1.53(d),
(continued	•	ation (CPA)) of prior applica		799,400
filed on	<u>2/12/97</u> , e	entitled CLOSURE FOR CAL	BLE CONNECTOR	
		NOTES		
			earte committe de la	
EXPRESS application confinuation ACCESS TO under 35 U. to copies concerning,	F.R. § 1:53(b): ABANDONMENT OF Pas of the filing date of the other application or the filing date.	PRIOR APPLICATION: The filing the request for a CPA. 37 C.F.R. i that is not to be abandoned. N: The filing of this CPA will be constant member of the public who ming, the prior application may be applications in the file jacket.	g of this CPA is a reques § 1.53(b) must be used to enstrued to include a waiver is entitled under the provision given similar access to,	C.F.R. § 1.53(d), but must be filed at to expressly abandon the prior of file a continuation, divisional, or rof confidentiality by the applicant ons of 37 C.F.R. § 1.14 to access copies of, or similar information
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[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box CPA, Washington, DC 20231.

b. Copies of IDS Citations

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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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01.455					 		
CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS		
	TOTAL CLAIMS (37 C.F.R. § 1.16(c) or (())	32 -20* =	12	x \$ 18.00 =	\$ 216.00		
	INDEPENDENT CLAIMS (37 C.F.R.§1.16(b) or (1))	2 -3** =	0	x \$ <u>78.00</u> =	0		
	MULTIPLE DEPENDENT	0					
		760.00					
		976.00					
	Reduction by 50% for filing	g by small entity (Note	37 C.F.R. §§ 1.9, 1.27 (ß 1.28).			
	* Reissue claims in excess	of 20 and over origina	i patent.	TOTAL =	976.00		
6 Small	■ Reissue Independent clai entity status:	ıms over original paten	<u>L</u>		770.00		
a. A small entity statement is enclosed, if (b) and (c) do not apply. b. A small entity statement was filed in the prior nonprovisional application and such status is still proper and desired. c. Is no longer claimed. 7. The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. 12 - 1095 a. E Fees required under 37 C.F.R. § 1.16. b. Fees required under 37 C.F.R. § 1.17. c. Fees required under 37 C.F.R. § 1.18. 8. A check in the amount of \$ is enclosed. 9. New Attorney Docket Number, if desired Prior application Attorney Docket Number will carryover to this CPA unless a new Attorney Docket Number has been provided herein.] 10 a. Receipt For Facsimile Transmitted CPA (PTO/SB/29A) b. Return Receipt Postcard (Should be specifically itemized, See MPEP 503) 11. Other:							
NOTE: The prior application's correspondence address will carry over to this CPA UNLESS a new correspondence address is provided below.							
12. NEW CORRESPONDENCE ADDRESS							
Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or New correspondence address below							
Name				part 60 C			
Address	Myo n 1313						
	ĺ				D 2600		
City		State		Zip Code			

13. SIGNATURE OF	APPLICANT, ATTORNEY, OR AGENT REQUIRED
Name (Print/Type)	STEPHEN B. GOLDMAN
Signature	
Registration No. (Attorney/Agent)	28,512
Date	2/23/99